

Initiation Timeframe Tip Sheet

Initiation timeframes are to be determined by centralized intake (CI). CI also assigns the program/subprogram to the report. The below guidance provides examples of initiation timeframes for reports; however, this is not an all-inclusive list and is intended as a guide for critical thinking as workers and supervisors are assessing the risk determination of a report.

DECISION POINT

Initiation timeframes are determined by the level of risk outlined in the intake based on the:

1. Child's chronological and developmental age;
2. Child's vulnerability;
3. Alleged perpetrator's access to the child;
4. Nature of the allegations; and
5. History of the family with the agency and the existence of prior reports.

A report is initiated **within four (4) hours** if the report:

1. Includes a child who is:
 - A. The alleged victim of a fatality or near fatality; or
 - B. A surviving child in the care of the alleged perpetrator of a child fatality or near fatality; or
2. Indicates a high risk of harm to the child requiring immediate protective intervention.

Examples may include, but are not limited to, the following reports:

- a. High risk of harm is present or likely;
- b. Child fatality or near fatality;
- c. Surviving child in the care of the alleged perpetrator of a child fatality or near fatality;
- d. Sexual abuse when the perpetrator has access;
- e. Physical abuse of a child age four or younger, or developmentally vulnerable child;
- f. Lack of supervision at the present of young/vulnerable children;
- g. Failure to thrive;
- h. Substance affected infants depending on when the report is received and the hospital discharge plan;
- i. Face to face contact should occur prior to the child's discharge from the hospital;
- j. Medical neglect, when life threatening without immediate attention;
- k. Substance abuse and meth use, if presentation of maltreatment is high risk and with young children;
- l. Human trafficking (depending on the situation and if the perpetrator has access); and
- m. Dependency in some cases (i.e. the parents have overdosed and the child is left alone, etc.).

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A report is initiated **within twenty-four (24) hours** if the report includes:

1. A high risk of harm to the child; or
2. Human trafficking allegation that does not fall within the four (4) hour initiation timeframe.

Examples may include, but are not limited to, the following reports:

- a. Human trafficking (depending on the situation and if the perpetrator has access);
- b. School aged children with observable injuries due to physical abuse;
- c. Sexual abuse with no perpetrator access;
- d. Substance affected infants depending on when the report is received and what the hospital discharge plan;
- e. Medical neglect that is not life threatening; and
- f. Other neglect subprograms depending on the presentation of maltreatment.

A report is initiated **within forty-eight (48) hours** if the report indicates moderate risk of harm.

Examples may include, but are not limited to, the following reports:

- a. Food neglect for a school age child;
- b. Environmental neglect; and
- c. Other neglect subprograms depending on the presentation of the maltreatment.

A report is initiated **within seventy-two (72) hours** if the report indicates low risk of harm.

Examples may include, but are not limited to, the following reports:

- a. Educational neglect;
- b. Allegations of a dirty house of a school age child;
- c. Hygiene and clothing neglect;
- d. Exploitation of child's resources;
- e. Emotional injury; and
- f. Dependency, depending on the physical location of the child and his/her age, including if a child is in the United States from another country and staying with friends.